## NONPROVISIONAL PATENT APPLICATION

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## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

OLIFF & BERRIDGE, PLC P.O. Box 19928 Alexandria, Virginia 22320 Telephone: (703) 836-6400 Facsimile: (703) 836-2787		Attorney Docket No.: 117542							
		Date: October 20, 2003							
		MAIL STOP PATENT API					LICATION		4
Customer Number:	25944	N	ON	PROVISIO	NAL APPL	ICATIO	N TRANSM	11TTAL	<u> </u>
Commissioner for Patents P.O. Box 1450				RULE §1.53(b)					22389 U.S. 10/6877
Alexandria, VA 22313-1450									10
Sir:									••
Transmitted herewith	for filing under 37	C.F.R. §1.53(b) is the	no	nprovisional	patent applic	cation			
For (Title): POLISHING AGENT AND LAPPING									
By (Inventors):	ors): Masayuki ASAHINA								
Formal drawings (Figs. 1-7; 4 sheets) are attached.  Use Figure for front page of Publication.  A Declaration and Power of Attorney is filed herewith.  This application claims benefit of Provisional Application No filed (A Preliminary Amendment is attached to reflect this claim in the Specification if not already present.)  This patent application is assigned to TATSUMORI LTD.  The executed Assignment is filed herewith.  An Information Disclosure Statement is filed herewith.  Entitlement to small entity status is hereby asserted.  A Preliminary Amendment is filed herewith.  Priority of foreign application No. 2002-313589 filed October 29, 2002 in Japan is claimed (35 U.S.C. §119).  A certified copy of the above corresponding foreign application(s) is filed herewith.  This application is NOT to be published under 35 U.S.C. 112(b). The undersigned attorney or agent hereby certifies that the invention disclosed in this application has not been and will not be the subject of an application filed in another country, or under a multilateral international agreement, that requires publication at eighteen months after filing.  CLAIMS IN THE APPLICATION AFTER ENTRY OF ANY PRELIMINARY AMENDMENT NOTED ABOVE  SMALL ENTITY  SMALL ENTITY									
FOR:	NO. FILED	NO. EXTRA		RATE	FEE	<u>OR</u>	RATE	FEE	
BASIC FEE					\$ 385	<u>OR</u>		\$ 770	-
TOTAL CLAIMS	19 - 20	= 0*		x 9=	\$	<u>OR</u>	x 18	\$	
INDEP CLAIMS	2 - 3	= 0*		x 43 =	\$	<u>OR</u>	x 86	\$	
☐ MULTIPLE DEPENDENT CLAIMS PRESENTED				+ 145 =	\$	OR	+ 290	\$	

<u>OR</u> **TOTAL** Check No. 147514 in the amount of \$385.00 to cover the filing fee is attached. Except as otherwise noted herein, the Commissioner is hereby authorized to charge any other fees that may be required to complete this filing, or to credit any overpayment, to Deposit Account No. 15-0461. Two duplicate copies of this sheet are attached.

Respectfully submitted,

\$ 385

TOTAL

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\* If the difference is less than zero, enter "0".